RESI WANTARF COPA

Application or Docket Number

PATENT APPLICATION FEE DETERMINATION RECORD

Effective November 10, 1998

CLAIMS AS FILED - PART I (Column 1) (Column 2)									SMALL ENTITY TYPE			OTHER THAN OR SMALL ENTITY		
FOR			NUMBER FILED		NUMBER EXTRA			RATE	FEE	7	RATE	FEE		
BASIC FEE										380.00	OR		760.00	
TOTAL CLAIMS			- 61	minus	20=	ń			X\$ 9=		OR	X\$18=		
INDEPENDENT CLAIMS				minus	3 =	*	· 		X39=		OR	X78=		
MULTIPLE DEPENDENT CLAIM PRESENT									+130=		OR	+260=		
* If the difference in column 1 is less than zero, enter "0" in column 2								1	TOTAL		OR	TOTAL	160	
CLAIMS AS AMENDED - PART II (Column 1) (Column 2) (Column 3)									OTHER THAN SMALL ENTITY OR SMALL ENTITY					
-			AIMS	A CONTRACTOR OF THE CONTRACTOR		HIGHEST	(Column 3)	1 -			, O''			
AMENDMENT A		A	IAINING FTER NDMENT		PF	NUMBER REVIOUSLY PAID FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	* 1	<u>i </u>	Minus	tt	20	= 6.		X\$ 9=		OR	X\$18=).	
	Independent	*)	Minus	***		= 7		X39=		OR	X78=		
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							' [+130=	·	OR	+260=		
	9-23-04	1						A	TOTAL ODIT. FEE		OR	TOTAL ADDIT. FEE		
		(Col	umn 1)	•	(C	olumn 2)	(Column 3)				•			
AMENDMENT B		REM AF	AIMS AINING TER IDMENT		PA	HIGHEST NUMBER REVIOUSLY PAID FOR	PRESENT EXTRA	ſ	RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE/	
	Total	* .	ł	Minus	AA	20	= /		X\$ 9=	7	OR	X\$18=	7	
	Independent FIRST PRESE	* /	N OF M	Minus	±±±	3 ENT CLAIM	<i>f</i>		X39=		OR	X78=	. /	
	, mor i, nede			OLTIFLE DEF	END	EIVI CLAIW			+130=		OR	+260=		
	•		,			•		A	TOTAL DDIT. FEE		OR ,	TOTAL ODIT. FEE	/	
			ımn 1)			olumn 2)	(Column 3)			•	٠			
AMENDMENT C.		REM/	AIMS AINING TER DMENT		PRI	IIGHEST IUMBER EVIOUSLY AID FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	•		Minus .	**	•	=.		X\$ 9=		OR	X\$18=	<u> </u>	
	Independent	*		Minus .	4**		e , ·	上	X39=		.	X78=		
_	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM						· ·	H			OR		·	
• If the sector to set of sector to									+130≡		OR	+260= →		
اا د.	If the entry in column 1 is less than the entry in column 2, write "0" in column 3. If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."										OR A	TOTAL DDIT. FEE		
T	ne "Highest Nur he "Highest Num	her Prev	viously Pa lough Pair	su ror IN IHIS d For (Total or	SPA(UE is less than	i 3, enter "3." hishast dumbas		DIT. FÉE L	ropriate hov	•			